

SENTINEL CHICKEN BLOOD - 2006

PLEASE DO NOT PLACE THIS SHEET INSIDE THE ZIPLOCK BAG

VRDL PAGE NUMBER

REGISTERED AGENCY CODE: _____ *SITE CODE _____

Name of Agency: _____

Name of Site: _____ Nearest City or Place: _____

County: _____

DATE BLED : ____/____/____ BLED BY: _____

CONTACT NAME: _____ Telephone (____) ____-____

NAME OF ALTERNATE: _____ Telephone (____) ____-____

WING BAND NUMBER IN SEQUENCE	REMARKS OR STATUS ("New" dead, missing, etc.) For new birds to flock, list the number and state "new bird"	WEE	SLE	WN

Remarks: (After bird has been reported dead, put band number and list as "old dead" or "old missing" in this space)

Date received by VRDL: ____/____/____. Tested: ____/____/____. Reported to agency contact: ____/____/____

List all birds that have been in the flock.

A COPY OF THIS FORM MUST ACCOMPANY ALL SHIPMENTS OF CHICKEN BLOOD TO VRDL.
 FUTURE SHIPMENTS FROM THIS SITE MUST USE THE SAME SITE CODE. TO REGISTER A NEW SITE,
 Go to <http://sentinel.ucdavis.edu/arbo.html> or FAX A COPY OF THE SITE
 To ahom@dhs.ca.gov
 OR E-MAIL TO cmbarker@ucdavis.edu, UC DAVIS.

Form MBVS-2